P16000049676

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W23-14475 Nessung Diarntiere Patola
Office Use Only



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February 3, 2023

JULIO L. PEREZ-VEGA 1600 LITTLE SPARROW CT WINTER SPRINGS, FL 32708

SUBJECT: VAISO LEVINE ACCOUNTING P.A.

Ref. Number: W23000014475

We have received your document for VAISO LEVINE ACCOUNTING P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

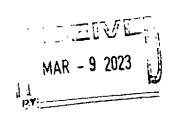
The specific business purpose of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather Regulatory Specialist III

Letter Number: 723A00002601



COVER LETTER

* TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Vaiso Inc.			
	BER: P16000049676			
	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Julio L. Perez-Vega			
		Name of Contact Person		
		Firm/ Company		
	1600 Little Sparrow Ct.			
	Address			
	Winter Springs			
		City/ State and Zip Code	3	
	JULPERVEG@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatic	on concerning this matter, pleas	se call:		
JULIO PEREZ-VEGA		at (<u>407</u>	221-4783	
Name	of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43,75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Arr Div	iling Address lendment Section ision of Corporations 3. Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President: V= Vice President: T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk: CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer. Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			<u> </u>
Remove 3) Change			
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6) Change			
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ach additional sheets, if nece	nal Articles, enter change ssary). (Be specific)			
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an amendment provides for	an exchange, reclassifica	ition, or cancellation o	of issued shares,	
rovisions for implementing	the amendment 11 not cor	itained in the amendi	nent itseit.	
(if not applicable, indicate	. 14/21)			
		<u> </u>		
<u>. </u>				

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory filing requirements, this date nent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
action was not required.	by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
[] The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	2023 HAR //// -1/4
by		· · · · · · · · · · · · · · · · · · ·
	(voting group)	ف ا
~	110/23	
Dated	10128	
Signature	17	7
selected, by	or, president of other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(1 yped or printed name of person signing)	
	(Title of person signing)	

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